	PATENT	Fife	ON FEE (DETERN ber 1, 2	/INAT 001	TION RECO	RD	•			1906		
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY		OTHE	R THAN	1
TOTAL CLAIMS			7	7				RATE	FEE	OF		LENTITY	4
F	OR	NUMBER FILED		NUMBER EXTRA			BASIC FI			RATE	FEE	4	
T	OTAL CHARGE	// minus 20=					X\$ 9=		\exists	BASIC FE	10.0	-	
IN	DEPENDENT	Q minus 3 =		•					_OR			4	
MULTIPLE DEPENDENT CLAIM PI								X42=		OR	X84=	ļ	1
*	f the difference	e in column 1 is	less than	-/-	*OR:-			+140=		OR	+280=		
	"If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL	890	1
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)										OTHE	THAN	1
d		CLAIMS		(Colun	ST	(Column 3)	Г	SMALL	ENTITY	¬OR	SMALL	ENTITY	1
AMENDMENT A		REMAINING AFTER AMENDMENT		PREVIO PAID I	USLY	PRESENT EXTRA		RATE	ADDI- TIONAI FEE	-	RATE	ADDI- TIONAL FEE	
	Total	1.24	Minus	* 2	0.	= U		X\$ 9=	/	OR	5 () ₹ X\$18=	200	X
¥	Independent	1.3	Minus	***	5_	= \		X42=	1		700.00 X84=	1-50	1
	PIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							•	1	OR			1
	82905						L	+140=,		OR	+280=		
		•		,	•		A	TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE	200	DO
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT	·	(Colum HIGHE NUMB PREVIOL	ST ER JSLY	(Column 3) PRESENT EXTRA	Γ	RATE	ADDI- TIONAL]	RATE	ADDI- TIONAL	
	Total	*	Minus	PAID F	OH		F		FEE	1 1		FEE	
200	Independent		Minus	***			L	X\$ 9=		OR	X\$18=		
3	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							X42=		OR	X84=		
							Ŀ	+140=		OR	+280=		
			•				AD	TOTAL DIT. FEE		OR ,	TOTAL DDIT. FEE		
_	· .	(Column 1)		(Column		(Column 3)			_	_ •	· · · · · · · ·		
		REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
	Total	*	Minus	At		=	T,	(\$ 9=	LE	_ h	X\$18=	FEE	
	Independent		Minus	***	1	=	\vdash			OR			
1	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT C	LAIM		L'	(42=		OR	X84=		
i if i	the entry in colum	nn 1 is less than the	entry in colum	nn 2, write *0	' in colu	mn 3.	Ŀ	140=		OR	+280=		
	ine riignest Nur the "Highest Nur	nber Previously Painber Previously Painber Previously Paid oer Previously Paid	d For IN THIS d For IN THIS	SPACE IS 16	ss than	20, enter "20."		TOTAL OIT. FEE		OR A	TOTAL DDIT. FEE		